

## UNITED STATES DISTRICT COURT

for the

Eastern District of Pennsylvania

CHARLIE ANDERSON, CHARLES E.  
 ARBUCKLE, ROD BERNSTINE, CURTIS  
 CEASAR, JR., HARRY COLON, ELBERT  
 CRAWFORD III, CLYDE P. GLOSSON, NILO  
 SILVAN, FRANKIE SMITH, JERMAINE SMITH,  
 ERIC J. SWANN AND ANTHONY TONEY

*Plaintiff(s)*

v.

Civil Action No. 2:13-cv-01981

RIDDELL, INC. d/b/a RIDDELL SPORTS GROUP,  
 INC.

*Defendant(s)*

## SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

Riddell, Inc. d/b/a Riddell Sports Group, Inc.  
~~4255 North State Highway, #300~~  
~~Iring, Texas 76038~~  
 9801 W Higgins #800  
 Rosemont IL 60018

A lawsuit has been filed against you.

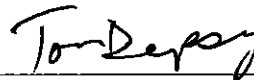
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

MICKEY WASHINGTON  
 5020 MONTROSE BLVD., SUITE 77006  
 HOUSTON, TX 77006

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: 1/14/2014



Signature of Clerk or Deputy Clerk

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 13-1981

**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Riddell Inc d/b/a Riddell Sports Group Inc.  
 was received by me on *(date)* 2/4/14

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
 on *(date)* \_\_\_\_\_; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
 \_\_\_\_\_, a person of suitable age and discretion who resides there,  
 on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* \_\_\_\_\_, who is  
 designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
 on *(date)* \_\_\_\_\_; or

☐ I returned the summons unexecuted because \_\_\_\_\_; or

☒ Other *(specify)*: Delivered to Riddell Inc d/b/a Riddell Sport Group Inc.  
By Cert Fed Mail at 9801 W Higgins #800 Rosemont IL 60068  
on 2/11/14

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ \_\_\_\_\_

I declare under penalty of perjury that this information is true.

Date: \_\_\_\_\_

Susan Wyntje  
*Server's signature*

Susan Wyntjes Process Server  
*Printed name and title*

306 Williamsport St Langue City Tx  
*Server's address*

Additional information regarding attempted service, etc:

77573

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature  <input checked="" type="checkbox"/> Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Riddell Inc            9801 W Higgins #800            Rosemont IL            60018</p>		<p>B. Received by (Printed Name) C. Date of Delivery            D. Szyba 2/11/14</p>	
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number (Transfer from)</p> <p>7011 2970 0000 3543 8372</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

PS Form 3811, February 2004

Domestic Return Receipt

Anderson

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